

# 2014 Consumer Confidence Report

Water System Name: Richgrove Community Services District Report Date: 10/6/16

*We test the drinking water quality for many constituents as required by state and federal regulations. This report shows the results of our monitoring for the period of January 1 - December 31, 2014 and may include earlier monitoring data.*

**Este informe contiene información muy importante sobre su agua potable. Tradúzcalo ó hable con alguien que lo entienda bien.**

Type of water source(s) in use: Ground Water – Well 4, Well 5

Name & general location of source(s): Well 5 located in corner of Rowland Avenue and Avenue 8, Well 4 located in Corner of Ames Drive and Richgrove Drive.

Drinking Water Source Assessment information: A source water assessment was conducted for the water supply in April 2002. The sources are considered most vulnerable to the following activities associated with contaminants detected in the water supply. Fertilizer, Pesticide/ Herbicide Application. The source is considered most vulnerable to the following activities not associated with any detected contaminants: Automobile- GS stations, and historic waste dumps/landfills. To view or request a copy of the completed assessment, please contact the District Office at (661) 725-5632.

Time and place of regularly scheduled board meetings for public participation: Regular Board Meetings are held every last Wednesday of the month at 20986B Grove Drive Richgrove, Ca 93261.

For more information, contact: Lorena Maldonado Phone: ( 661 ) 725-5632

## TERMS USED IN THIS REPORT

**Maximum Contaminant Level (MCL):** The highest level of a contaminant that is allowed in drinking water. Primary MCLs are set as close to the PHGs (or MCLGs) as is economically and technologically feasible. Secondary MCLs are set to protect the odor, taste, and appearance of drinking water.

**Maximum Contaminant Level Goal (MCLG):** The level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs are set by the U.S. Environmental Protection Agency (USEPA).

**Public Health Goal (PHG):** The level of a contaminant in drinking water below which there is no known or expected risk to health. PHGs are set by the California Environmental Protection Agency.

**Maximum Residual Disinfectant Level (MRDL):** The highest level of a disinfectant allowed in drinking water. There is convincing evidence that addition of a disinfectant is necessary for control of microbial contaminants.

**Maximum Residual Disinfectant Level Goal (MRDLG):** The level of a drinking water disinfectant below which there is no known or expected risk to health. MRDLGs do not reflect the benefits of the use of disinfectants to control microbial contaminants.

**Primary Drinking Water Standards (PDWS):** MCLs and MRDLs for contaminants that affect health along with their monitoring and reporting requirements, and water treatment requirements.

**Secondary Drinking Water Standards (SDWS):** MCLs for contaminants that affect taste, odor, or appearance of the drinking water. Contaminants with SDWSs do not affect the health at the MCL levels.

**Treatment Technique (TT):** A required process intended to reduce the level of a contaminant in drinking water.

**Regulatory Action Level (AL):** The concentration of a contaminant which, if exceeded, triggers treatment or other requirements that a water system must follow.

**Variances and Exemptions:** State Board permission to exceed an MCL or not comply with a treatment technique under certain conditions.

**ND:** not detectable at testing limit

**ppm:** parts per million or milligrams per liter (mg/L)

**ppb:** parts per billion or micrograms per liter (µg/L)

**ppt:** parts per trillion or nanograms per liter (ng/L)

**ppq:** parts per quadrillion or picogram per liter (pg/L)

**pCi/L:** picocuries per liter (a measure of radiation)



**The sources of drinking water** (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs, and wells. As water travels over the surface of the land or through the ground, it dissolves naturally-occurring minerals and, in some cases, radioactive material, and can pick up substances resulting from the presence of animals or from human activity.

**Contaminants that may be present in source water include:**

- *Microbial contaminants*, such as viruses and bacteria that may come from sewage treatment plants, septic systems, agricultural livestock operations, and wildlife.
- *Inorganic contaminants*, such as salts and metals, that can be naturally-occurring or result from urban stormwater runoff, industrial or domestic wastewater discharges, oil and gas production, mining, or farming.
- *Pesticides and herbicides* that may come from a variety of sources such as agriculture, urban stormwater runoff, and residential uses.
- *Organic chemical contaminants*, including synthetic and volatile organic chemicals, that are by-products of industrial processes and petroleum production, and can also come from gas stations, urban stormwater runoff, agricultural application, and septic systems.
- *Radioactive contaminants*, that can be naturally-occurring or be the result of oil and gas production and mining activities.

**In order to ensure that tap water is safe to drink**, the USEPA and the State Water Resources Control Board (State Board) prescribe regulations that limit the amount of certain contaminants in water provided by public water systems. State Board regulations also establish limits for contaminants in bottled water that provide the same protection for public health.

**Tables 1, 2, 3, 4, 5, 7, and 8 list all of the drinking water contaminants that were detected during the most recent sampling for the constituent.** The presence of these contaminants in the water does not necessarily indicate that the water poses a health risk. The State Board allows us to monitor for certain contaminants less than once per year because the concentrations of these contaminants do not change frequently. Some of the data, though representative of the water quality, are more than one year old.

**TABLE 1 – SAMPLING RESULTS SHOWING THE DETECTION OF COLIFORM BACTERIA**

Microbiological Contaminants (complete if bacteria detected)	Highest No. of Detections	No. of months in violation	MCL	MCLG	Typical Source of Bacteria
Total Coliform Bacteria	(In a mo.) 0	0	0	0	Naturally present in the environment
Fecal Coliform or <i>E. coli</i>	(In the year) 0	0	0	0	Human and animal fecal waste

**TABLE 2 – SAMPLING RESULTS SHOWING THE DETECTION OF LEAD AND COPPER**

Lead and Copper (complete if lead or copper detected in the last sample set)	Sample Date	No. of samples collected	90 <sup>th</sup> percentile level detected	No. sites exceeding AL	AL	PHG	Typical Source of Contaminant
Lead (ppb)	6/04/12	10	0.11	0	15	0.2	Internal corrosion of household water plumbing systems; discharges from industrial manufacturers; erosion of natural deposits
Copper (ppm)	6/04/12	10	0.029	0	1.3	0.3	Internal corrosion of household plumbing systems; erosion of natural deposits; leaching from wood preservatives

**TABLE 3 – SAMPLING RESULTS FOR SODIUM AND HARDNESS**

Chemical or Constituent (and reporting units)	Sample Date	Average Level Detected	Range of Detections	MCL	PHG (MCLG)	Typical Source of Contaminant
Sodium (ppm)	2012	83.5	76-91	none	none	Salt present in the water and is generally naturally occurring
Hardness (ppm)	2012	52	39-65	none	none	Sum of polyvalent cations present in the water, generally magnesium and calcium, and are usually



						naturally occurring
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\*Any violation of an MCL or AL is asterisked. Additional information regarding the violation is provided later in this report.

**TABLE 4 – DETECTION OF CONTAMINANTS WITH A PRIMARY DRINKING WATER STANDARD**

Chemical or Constituent (and reporting units)	Sample Date	Average Level Detected	Range of Detections	MCL [MRDL]	PHG (MCLG) [MRDLG]	Typical Source of Contaminant
Arsenic ( µg/l)	2014	6.15	3.7-9.1	10	0.004	Erosion of natural deposits; residue from some surface water treatment processes
Nitrate (as N03) (mg/l)	2014	16	11-20	45	45	Runoff and leaching from fertilizer use; leaching from septic tanks and sewage; erosion of natural deposits
Fluoride (mg/l)	2012	17.5	0.14-0.21	2	1	Erosion of natural deposits; water additive which promotes strong teeth; discharge from fertilizer and aluminum factories.
Barium (mg/l)	7/24/2012	.065	0.029-.100	1	2	Discharge of oil drilling wastes and from metal refineries; erosion of natural deposits.

**TABLE 5 – DETECTION OF CONTAMINANTS WITH A SECONDARY DRINKING WATER STANDARD**

Chemical or Constituent (and reporting units)	Sample Date	Average Level Detected	Range of Detections	MCL	PHG (MCLG)	Typical Source of Contaminant
Total Dissolved Solids (ppm)	7/24/2012	345	330-360	1000- 1500	1000-1500	Runoff/leaching from natural deposits
Chloride (ppm)	7/24/2012	50.5	41-60	500-600	500-600	Runoff/leaching from natural deposits
Manganese (ppb)	7/24/2012	10	10	20-50	20-50	Leaching from natural deposits
Specific Conductance (uS/cm)	7/24/2012	523	476-570	1600- 2200	1600	Substances that form ions when in water; seawater influence
Sulfate (ppm)	7/24/2012	63.5	54-73	500	500	Runoff/leaching from natural deposits; industrial wastes

**TABLE 6 – DISTRIBUTION SYSTEM**

Chemical or Constituent (and reporting units)	Sample Date	Average Level Detected	Range of Detections	Notification Level	Health Effects Language
TTHM's (ppb)	7/24/2014	4.9	4.9	80	By- product of drinking water disinfection.
HAA5s (ppb)	7/24/2014	2.6	2.6	60	By-product of drinking water disinfection.

\*Any violation of an MCL, MRDL, or TT is asterisked. Additional information regarding the violation is provided later in this report.

### Additional General Information on Drinking Water

Drinking water, including bottled water, may reasonably be expected to contain at least small amounts of some contaminants. The presence of contaminants does not necessarily indicate that the water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the USEPA's Safe Drinking Water Hotline (1-800-426-4791).

Some people may be more vulnerable to contaminants in drinking water than the general population. Immuno-compromised persons such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at



risk from infections. These people should seek advice about drinking water from their health care providers. USEPA/Centers for Disease Control (CDC) guidelines on appropriate means to lessen the risk of infection by *Cryptosporidium* and other microbial contaminants are available from the Safe Drinking Water Hotline (1-800-426-4791).

**Lead-Specific Language for Community Water Systems:** If present, elevated levels of lead can cause serious health problems, especially for pregnant women and young children. Lead in drinking water is primarily from materials and components associated with service lines and home plumbing. Richgrove Community Service District is responsible for providing high quality drinking water, but cannot control the variety of materials used in plumbing components. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking. If you are concerned about lead in your water, you may wish to have your water tested. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the Safe Drinking Water Hotline or at <http://www.epa.gov/lead>.

Arsenic may cause some people who drink water containing arsenic in excess of the MCL over many years to experience skin damage or circulatory problems, and may cause an increased risk of getting cancer.

### Summary Information for Violation of a MCL, MRDL, AL, TT, or Monitoring and Reporting Requirement

VIOLATION OF A MCL, MRDL, AL, TT, OR MONITORING AND REPORTING REQUIREMENT				
Violation	Explanation	Duration	Actions Taken to Correct the Violation	Health Effects Language
Annual Report	The District did not submit an annual report for year 2014 to the State Water Resources Control Board, Division of Drinking Water.	2014	The 2014 annual report was prepared and submitted electronically to the Division of Drinking water in 2016.	N/A
Chlorine Residual Monitoring & Reporting	We are required to monitor your drinking water for specific contaminants on a regular basis. Results of regular monitoring are an indicator of whether or not our drinking water meets health standards. During October 2013 through February 2014 we did not monitor or test for chlorine and therefore cannot be sure of the quality of the drinking water during that time.	October 2013-February 2014	The City resumed collecting chlorine residual measurements at the same time and locations that the bacteriological samples were collected in March 2015.	Some people who use water containing chlorine well in excess of the maximum residual disinfectant level (MRDL) could experience irritating effects to their eyes and nose. Some people who drink water containing chlorine well in excess of the MRDL could experience stomach discomfort.
Hexavalent Chromium Monitoring & Reporting	We are required to monitor your drinking water for specific contaminants on a regular basis. Results of regular monitoring are an indicator of whether or not our drinking water meets health standards. During 2014	2014	The District conducted monitoring for hexavalent chromium in April 2015 and reported results to the Division of Drinking Water. Both well samples resulted in hexavalent chromium concentrations below the MCL of 10 µg/L.	Some people who drink water containing hexavalent chromium in excess of the MCL over many years may have an increased risk of getting cancer.

	we did not monitor or test for hexavalent chromium and therefore cannot be sure of the quality of the drinking water during that time.			
Consumer Confidence Report (CCR)	The District did not issue a CCR for year 2014 to Richgrove CSD residents in 2014.	2014	The following CCR is being delivered to residence in compliance with Section 116470 of the Health & Safety Code, and Sections 64480 and 64483 of Title 22, California Code of Regulations.	N/A